

LYNCHBURG PARKS & RECREATION DEPARTMENT

301 Grove Street, Lynchburg, VA 24501

Phone: (434) 455-5858

Fax: (434) 528-2794

Cancellations: (434) 455-5860

• Direct Number for Senior Adult Program: (434) 455-4000

web site: www.lynchburgva.gov/parksandrec

Office Hours: M-F 8:30 am - 5:00 pm (Closed City Holidays)

Registration Form for Classes & Trips with an Activity Number Only

Payment must accompany Registration Form

(Please note the Parks & Recreation refund policy at the right of the registration form.)



How did you hear about us? ☐ Website ☐ Newspaper ☐ Radio ☐ TV
Other: (Please list):

City Resident: ☐ Yes ☐ No

(Only participants living in the City are eligible for City rates)

Name of Participant:

Address:

City, State, Zip:

Home Phone:

Work or Cell Phone:

Birth Date:

☐ Male

☐ Female

Name of emergency
contact for participant:

Phone:

Allergies/important
medical notes:

Please add my name to the following newsletter mailing lists:

☐ Arts/Classes ☐ Athletics ☐ Naturalist ☐ Senior ☐ Youth Programs

Name of Person Paying for Activities:
(if different than participant)

Address of person paying for activities:
(City, State, Zip)

Home Phone:

Work Phone:

Liability, 911 & Photo Release

In consideration of the permission granted to me/my child by Lynchburg Parks & Recreation Department, I hereby release and save harmless the City of Lynchburg, its officers and employees from all actions, causes of action, damages and claims, or demands which I, my heirs, executors, administrators, or assigns may have against the City of Lynchburg, and/or other described parties for all personal injuries known or unknown incurred by participation in this/these activity(s).

In the event of a medical emergency, I authorize representatives of Lynchburg Parks & Recreation to contact EMS at 911, if I or my child is incapacitated. In the event I or my child requires medical treatment, I agree to be responsible for the cost of such treatment.

I am aware and agree that my child or I may be filmed or photographed and/or interviewed by news media, such as WSET and the *News and Advance*, as they are often invited to cover programs to help raise awareness of and promote Parks and Recreation activities. I also agree to allow the Lynchburg Parks & Recreation Department to use these photographs in any of its publications.

I, the undersigned, have read this release and understand all its terms.

Signature of participant, parent,
or legal guardian (REQUIRED)

Winter 2007 Registration begins 1/25

- ♦ Walk-in registration is accepted Monday-Friday (except City holidays) from 8:30 am to 5:00 pm at the Customer Service Desk at the Miller Center, 301 Grove Street.
- ♦ Complete a Registration Form for each person (photocopies accepted). Registration forms should be used for the classes, activities or trips that have activity numbers.
- ♦ Registration is on a first-come, first-pay basis.
- ♦ Payment is necessary to complete registration unless otherwise indicated.
- ♦ Cash and checks or money orders made payable to the City of Lynchburg are accepted. Please do not send cash through the mail.
- ♦ Participants who register by mail should assume they are enrolled in all of the classes/trips for which registered. You will be contacted if the activity is full or cancelled.
- ♦ Senior Adult Program activities and classes are open to adults under the age of 55 one week prior to the activity (or as stated), space permitting.
- ♦ Registration deadlines vary per class or activity and in most cases are one week prior to the start date. Late fees may apply.
- ♦ Only registered participants are permitted in classes.

Full or Cancelled Activities

- ♦ Classes, activities and trips may be cancelled if minimum enrollments are not met by the deadline or, in some cases, by one week prior to the activity.
- ♦ If programs are full or cancelled by the Department, participants will be contacted within three business days to discuss an alternative activity option or a refund. If the participant cannot be contacted within three business days, a refund will be processed or payment will be voided and returned.

Refund Policy

- ♦ Refunds will only be considered if requested at least 10 business days prior to the start of the program and may be subject to an administrative fee for incurred costs.
- ♦ No refunds (or partial refunds) will be issued to customers who fail to attend an activity.

Activity Title	Start Date	Activity Number	City Resident (CR) or Non-Resident (NR) Rates
			\$
			\$
			\$
(Office Use Only) Processed by: _____	Receipt #: _____ Date: _____	Receipt Requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total \$

Lynchburg Parks and Recreation Department complies with the Americans with Disabilities Act for qualified individuals. If reasonable accommodation is needed, please tell us upon registering and at least 10 days prior to the class or event.



Key to Abbreviations:

CR = City Resident
NR = Non-Resident
YNS = Youth & Neighborhood Services

All programs are planned in advance. Some may be cancelled for economic or other reasons. Please call the Parks & Recreation Department at (434) 455-5858 for updated information.

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